

COUNTY OF MAUI
DEPARTMENT OF PLANNING
250 SOUTH HIGH STREET
WAILUKU, MAUI, HAWAII 96793
TELEPHONE:(808) 270-7735 FAX: (808) 270-7634

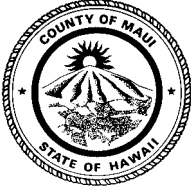
APPLICATION FOR AMENDMENT TO
PERMIT TERMS, CONDITIONS, AND TIME
STIPULATIONS

Identify Terms, Conditions, or Time Stipulation for which Amendment Sought:

1. The specific terms, conditions, or time stipulation sought to be amended.
2. If an extension of a time stipulation is requested, the length of time extension desired.

Submittals to Accompany Application:

1. The reasons in support of the requested amendment
2. An updated list of the names and addresses of owners of real property situated within 500 feet of the boundaries of the land for which the permit was issued
3. A Fee as specified in the Budget. If a public hearing is required, Table A shall be used; if not, then Table B shall be used to determine the Fee.
4. Any other information and documentation required by the Director.



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APPLICATION TYPE: AMENDMENT TO PERMIT TERMS, CONDITIONS, AND TIME STIPULATION

DATE: _____ **VALUATION:** \$ _____

PROJECT NAME: _____

PROPOSED DEVELOPMENT: _____

TAX MAP KEY NO.: _____ **CPR/HPR NO.:** _____ **LOT SIZE:** _____

PROPERTY ADDRESS: _____

OWNER: _____ **PHONE:(B)** _____ **(H)** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

OWNER SIGNATURE: _____

APPLICANT: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

PHONE (B): _____ **(H):** _____ **FAX:** _____

APPLICANT SIGNATURE: _____

AGENT NAME: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

PHONE (B): _____ **(H):** _____ **FAX:** _____

EXISTING USE OF PROPERTY: _____

CURRENT STATE LAND USE DISTRICT BOUNDARY DESIGNATION: _____

COMMUNITY PLAN DESIGNATION: _____ **ZONING DESIGNATION:** _____

OTHER SPECIAL DESIGNATIONS: _____

COUNTY OF MAUI
DEPARTMENT OF PLANNING

ZONING AND FLOOD CONFIRMATION REQUEST FORM

APPLICANT: _____ PHONE NO.: _____

ADDRESS: _____

PROJECT NAME: _____

ADDRESS AND/OR LOCATION: _____

TMK NUMBER(S): _____

ZONING INFORMATION

STATE LAND USE _____ COMMUNITY PLAN _____

COUNTY ZONING _____ SPECIAL DISTRICT _____

OTHER _____

FLOOD INFORMATION

FLOOD HAZARD AREA* ZONE _____

BASE FLOOD ELEVATION _____ mean sea level, 1929 National
Geodetic Vertical Datum or for Flood Zone A0, FLOOD DEPTH _____
feet.

FLOODWAY [] Yes or [] No

FLOOD DEVELOPMENT PERMIT IS REQUIRED [] Yes or [] No

* For flood hazard area zones B or C; a flood development permit would be required if any work is done in any drainage facility or stream area that would reduce the capacity of the drainage facility, river, or stream, or adversely affect downstream property.

FOR COUNTY USE ONLY

REMARKS/COMMENTS: _____

- ☐ Additional information required.
- ☐ Information submitted is correct.
- ☐ Correction has been made and initialed.

Reviewed and Confirmed by:

Signature

Date

Zoning Administration and Enforcement Division